



MARE TRANSFER OF OWNERSHIP REPORT IN CONNECTION WITH THE KENTUCKY THOROUGHBRED BREEDERS' INCENTIVE FUND (KHRA Form 20-4) (4/06)

KENTUCKY HORSE RACING COMMISSION

4063 Iron Works Parkway, Building B, Lexington, KY 40511, Phone: 859-246-2847 Fax: 859-246-2887
www.khrc.ky.gov

Please go to www.khrc.ky.gov for interactive online application.
 Please print clearly.

FORMER BREEDER INFORMATION:

(Owner)—(Print the name of the breeder who transferred the mare to a new breeder) If multiple owners, partnership, corporation, etc. list according to the intended Jockey Club filings and use the managing owner's contact information below. Be sure to clearly identify the managing owner or entity name above.

 (Street) (City) (State) (Zip)

 (Phone Number) (Fax Number) (E-Mail Address)

NEW BREEDER INFORMATION:

(Owner)—(Print the name of the breeder who became the new breeder of record after the transfer) If multiple owners, partnership, corporation, etc. list according to the intended Jockey Club filings and use the managing owner's contact information below. Be sure to clearly identify the managing owner or entity name above.

 (Street) (City) (State) (Zip)

 (Phone Number) (Fax Number) (E-Mail Address)

NEW BOARDING FARM INFORMATION

(provide new location of the mare)

 (Name of Farm) (Farm Owner / Manager)

 (Street) (City) (State) (Zip)

 (Phone Number) (Fax Number) (E-Mail Address)

 (Date mare will begin boarding at above location)

NAME OF MARE	MARE'S YEAR OF BIRTH	SIRE OF DAM	COVERING SIRE	DATE OF TRANSFER (MONTH, DATE, YEAR)

AFFIDAVIT BY TRANSFERING BREEDER OR THE AUTHORIZED AGENT. I hereby certify that the above mare was transferred to the breeder listed below.

 QUALIFIED BREEDER OR AUTHORIZED AGENT (print name)
If by agent, Authorized Agent Form must be on file with the KHRC

 (signature)

AFFIDAVIT BY NEW BREEDER OR THE AUTHORIZED AGENT. I hereby certify that above mare was transferred to me and I am the new breeder. I further certify that: each foal when delivered will meet the requirements set forth in Section 5 of 810 KAR 1:070 to be a KBIF Registered Horse; the information on this form is correct and I understand that if the information on the form changes and the form is no longer correct I am required to amend the form within thirty (30) days after the information changes (other than a change of the mare's address within Kentucky); I assume full responsibility for the registration of the horse as a KBIF Registered Horse and agree that if the horse is later proved to be ineligible due to false or misleading information provided in this form that: (1) the registration of the foal may be denied, suspended or revoked; (2) I may be forever barred from registering foals for the KBIF; and (3) I may be subject to civil and criminal penalties under the laws of the Commonwealth of the Kentucky for providing fraudulent information. Furthermore, I agree to promptly provide any additional information to the official registrar upon request to confirm information submitted with this registration, or registration may be denied, suspended or revoked. If this registration is being submitted by an agent for the breeder, then said agent certifies that he has filed an Authorized Agent form permitting him full authority to act on the breeder's behalf in this matter. If submitted by an agent, then the agent, as well as the breeder, may be subject to the above penalties.

QUALIFIED BREEDER OR AUTHORIZED AGENT (print name)
If by agent, Authorized Agent Form must be on file with the KHRC

(signature)

Received by: _____ (KHRC Staff)

Date: _____ Time: _____

(Registration Number of mare supplied by The Jockey Club)